



Montgomery County Department of Housing and Community Affairs  
Division of Consumer Affairs \* Licensing and Registration Unit  
100 Maryland Avenue, Rockville, Maryland 20850  
240-777-3799 • FAX 240-777-3699 • TTD 240-777-3639 • <http://hca.montgomerycountymd.org>

# Single-Family\Condominium RENTAL FACILITY LICENSE APPLICATION

- ☐ Please print clearly or type. Answer all applicable questions.
- ☐ Completed application MUST be signed by the property owner.
- ☐ Payment MUST accompany application.
- ☐ Make checks payable to MONTGOMERY COUNTY, MARYLAND
- ☐ Mail completed application with payment to:

**Licensing and Registration Unit  
DHCA, Division of Consumer Affairs  
100 Maryland Avenue, Room 330  
Rockville, Maryland 20850**

## OFFICE USE ONLY

LICENSE # \_\_\_\_\_

Date Recorded \_\_\_\_\_

By \_\_\_\_\_

Deposit \_\_\_\_\_

## RENTAL PROPERTY ADDRESS

Street Number \_\_\_\_\_ Street Name \_\_\_\_\_ Unit# \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Owner's Emergency Phone Number \_\_\_\_\_ Community/Homeowner Association Name (if applicable) \_\_\_\_\_

## OCCUPANT INFORMATION

Is the property: Owner Occupied?.....YES ☐ NO ☐  
Relative Occupied?.....YES ☐ NO ☐

(A relative is defined as a: Spouse, Sibling, Parent, Grandparent, Child, or Grandchild.)

If the answer to either of these questions is YES, you DO NOT need a Rental Facility License.

## LICENSE FEE/STRUCTURE TYPE

Please check below your property's **Structure Type** to determine the amount due.

The licensing year is **July 1 through June 30** and **fees cannot be prorated**.

The full fee is due if the property is rented for any portion of a licensing year.

Structure Type	Annual Unit Fee	Structure Type	Annual Unit Fee
Single Family Detached House <input type="checkbox"/>	\$95.00	Garden Apartment <input type="checkbox"/>	\$55.00
Townhouse <input type="checkbox"/>	\$95.00	High-rise Apartment <input type="checkbox"/>	\$55.00
Duplex <input type="checkbox"/>	\$95.00	Stacked Piggyback Townhouse <input type="checkbox"/>	\$55.00
Back-to-Back Townhouse <input type="checkbox"/>	\$95.00		
Quadrplex <input type="checkbox"/>	\$95.00		

## OWNERSHIP INFORMATION

Please provide owner information in the appropriate section.

### A. Sole Proprietorship (Individual)

*If applicable*

<b>First Owner's Name</b>	<b>Second Owner's Name</b>
First Owner's Street Address (If P.O. Box, Must Assign Legal Agent)	Second Owner's Street Address
City State Zip	City State Zip
Daytime Phone Evening Phone	Daytime Phone Evening Phone
Fax# Email Address	Fax# Email Address

### B. Partnership or Limited Liability Company

<b>Name of Partnership</b>	<b>Partner's Name</b>
Partnership Street Address	Partner's Street Address
City State Zip	City State Zip
Daytime Phone Evening Phone	Daytime Phone Evening Phone
Fax# Email Address	Fax# Email Address

For additional partners/members holding 10% or more interest in the Partnership/LLC, please provide contact information on a separate sheet.

### C. Trust

<b>Name of Trust</b>	<b>Trustee's Name</b>
Trustee's Street Address	Daytime Phone Evening Phone
City State Zip	Fax# Email Address

### D. Corporation

<b>Name of Corporation</b>	<b>Name of Maryland Resident Agent</b>
Corporation Street Address	Resident Agent's Street Address
City State Zip	City State Zip
Daytime Phone Evening Phone	Daytime Phone Evening Phone
Fax# Email Address	Fax# Email Address

<b>Corporation President's Name</b>	
Corporation President's Street Address	Daytime Phone Evening Phone
City State Zip	Fax# Email Address

## CONTACT INFORMATION

Who should we contact for business purposes, such as annual license renewal?

☐ Owner as listed    ☐ Administrative Agent As Listed Below (*Retaining an Agent is not required.*)

## ADMINISTRATIVE AGENT

<hr/> <b>Agent's Name</b>		<hr/> Agent's Street Address	
<hr/> Agent's Company Name (if applicable)		<hr/> City	<hr/> State
			<hr/> Zip
<hr/> Daytime Phone	<hr/> Evening Phone	<hr/> Fax#	<hr/> Email Address

## LEGAL AGENT

The law requires all owners to assign a Legal Agent to receive legal service of process. Owners residing in Maryland may designate themselves. Those who do not reside in Maryland **MUST** designate a Legal Agent who resides within the State of Maryland.

### IMPORTANT

- ✓ **The Legal Agent cannot be your tenant.**
- ✓ You must provide the Legal Agent's **MARYLAND HOME** address.
- ✓ The Legal Agent **MUST** sign below to accept responsibility as agent.

☐ Owner designates self as Legal Agent and resides in the STATE OF MARYLAND  
(*Home address provided under Ownership Information.*)

☐ Owner designates the below named Maryland resident as Legal Agent

<hr/> <b>Legal Agent's Name</b>			
<hr/> Legal Agent's HOME Street Address		<hr/> Daytime Phone	<hr/> Evening Phone
<hr/> City Maryland		<hr/> Fax#	<hr/> Email Address
<hr/> Zip			

*I understand and accept responsibility as Legal Agent for service of legal process:*

**X**

\_\_\_\_\_  
**Legal Agent's Signature**

\_\_\_\_\_  
**Date**

.....

## OWNER'S SIGNATURE (*Agent's signature not acceptable*)

*I affirm under penalty of perjury that the above information is true to the best of my knowledge and belief. I also understand if there are any changes in property ownership, owner address, or agent/contact information that I must notify the Department within 10 days of the change.*

**X**

\_\_\_\_\_  
**Owner's Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
Print or Type Name of Person Signing

### Has the Owner:

- ☐ Signed the Application?    ☐ Designated a Legal Agent in Maryland?    ☐ Enclosed License Fee Payment?  
☐ **Made Check Payable to Montgomery County, Maryland?**